

PATENT *EPW*

IN THE UNITED STATES
PATENT AND TRADEMARK OFFICE

APPLICANT(S): Navarre Stephen Ginsberg

APPLICATION NO.: 10/710,996

FILING DATE: 08/16/2004

TITLE: Animal food distributor

EXAMINER:

GROUP ART UNIT: 3643

ATTY. DKT. NO.:

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below:

Dated: March 13, 2006By: Navarre Stephen Ginsberg
Applicant

COMMISSIONER FOR PATENTS
P.O. BOX 1450
ALEXANDRIA, VA 22313-1450

STATUS REQUEST

SIR:

Our file for the subject application reveals that there has been no action on this application since the filing of the application on August 16, 2004..

Please inform the undersigned, at the below stated address, of the status of this application.

Respectfully submitted,
NAVARRE STEPHEN GINSBERG

Dated: March 13, 2006

By: *Navarre Stephen Ginsberg*
Navarre Stephen Ginsberg
29585 Fox Hollow Road
Eugene, OR 97405
Tel.: (541) 485-4271
Fax.: (541) 346-0474



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TRANSMITTAL FORM <i>(to be used for all correspondence during pendency of filed application)</i>		Application Number	10/710,996
		Filing Date	8/16/2004
		First Named Inventor	Navarre Stephen Ginsberg
		Group Art Unit Number	3643
		Examiner Name	
Total Number of Pages in This Submission	2 + postcard	Attorney Docket Number	

ENCLOSURES (check all that apply)	
<input type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Check Enclosed <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Response to Notice to File Missing Parts <input type="checkbox"/> Assignment & Recordation Cover Sheet <input type="checkbox"/> Declaration <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Information Disclosure Statement & PTO/SB/08A <input type="checkbox"/> Copies of IDS Cited References <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Request for Correction of Recorded Assignment <input type="checkbox"/> Amendment/Response: [] Page(s) <input type="checkbox"/> After Final <input checked="" type="checkbox"/> Status Request <input type="checkbox"/> Revocation and Substitute Power of Attorney	<input type="checkbox"/> Issue Fee Transmittal <input type="checkbox"/> Letter to Chief Draftsperson <input type="checkbox"/> Formal Drawing(s): [] Sheet(s) of Figure(s) [] <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
REMARKS:	

SIGNATURE OF APPLICANT			
Signature:			
	Navarre Stephen Ginsberg	Dated:	March 13, 2006

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Signature:			
Typed or Printed Name:	Navarre Stephen Ginsberg	Dated:	March 13, 2006
Express Mail Mailing Number (optional):			